

Center Name: Los Ninos Montessori		Address: 6923 4th St. NW Los Ranchos de Albuquerque, NM 87107			Phone: (505)345-4618		
License Number: 157899	Issue Date: 01/1/2017	Expiration Date: 07/23/2017	Type: 2 Star Child Care Center		Status: Licensed		
Capacity					Census		
Over Age 2:	46	Under Age 2:	18	Night Care:	0	Playground:	48
		Over 2:	36	Under 2:	5		
Days and Hours of Operation							
	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>	<u>Sunday</u>
Opening Times:	07:00 AM	07:00 AM	07:00 AM	07:00 AM	07:00 AM	Closed	Closed
Closing Times:	06:00 PM	06:00 PM	06:00 PM	06:00 PM	06:00 PM		
# of Classrooms: 3	Purpose: Annual		Date: 05/30/2017		Time: 01:00 PM		
Comments A second visit will be conducted to view staff and children's files.							

A SURVEY OF YOUR FACILITY HAS BEEN MADE AND YOU ARE NOTIFIED OF NON-COMPLIANCE OF THE REGULATIONS AS NOTED BELOW:

Licensure	
8.16.2.11 A TYPES OF LICENSES	Not Inspected
8.16.2.11 B RENEWAL OF LICENSE	Not Inspected
8.16.2.11 D NON-TRANSFERABLE RESTRICTIONS OF LICENSE	Not Inspected
8.16.2.12 A, K, M LICENSING ACTIONS AND ADMINISTRATIVE APPEALS	Not Inspected
8.16.2.17 E, F SURVEYS FOR CHILD CARE FACILITIES <u>Deficiencies</u> The licensee did not permit the licensing authority representative access to the child care facility records. Files not accessible at the time of visit. Regulation: 8.16.2.17E <u>Corrective Action Plan</u> The licensee will grant the licensing authority representative access to the child care facility records at anytime during the licensure period. Date to be Completed: 06/30/2017	Non-compliance
8.16.2.18 D COMPLAINTS	Not Inspected
8.16.2.21 A LICENSING REQUIREMENTS	Not Inspected
8.16.2.21 B CAPACITY OF CENTERS	Compliance
8.16.2.21 C INCIDENT REPORTING REQUIREMENTS	Not Inspected
Administrative Requirements	
8.16.2.22 A ADMINISTRATION RECORDS	Compliance
8.16.2.22 B MISSION, PHILOSOPHY AND CURRICULUM STATEMENT	Compliance
8.16.2.22 C POLICY AND PROCEDURES	Compliance
8.16.2.22 D FAMILY HANDBOOK	Compliance
8.16.2.22 E CHILDREN'S RECORDS	Not Inspected
8.16.2.22 F PERSONNEL RECORDS	Not Inspected

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Administrative Requirements		
8.16.2.22 G PERSONNEL HANDBOOK		Compliance
Personnel & Staffing		
8.16.2.23 A PERSONNEL AND STAFFING REQUIREMENTS Deficiencies In the 18 mo. - 35 mo. class room(s) the staffing/child ratio was exceeded when two educators were with 16 children. Regulation: 8.16.2.23A(9) Corrective Action Plan A program will maintain staff/child ratios and group sizes at all times. Children must never be left unattended whether inside or outside the facility. Staff will be onsite, available and responsive to children during all hours of operation. Corrected on site. Date to be Completed: 06/30/2017		Non-compliance
8.16.2.23 B STAFF QUALIFICATIONS AND TRAINING		Not Inspected
8.16.2.23 C STAFF/CHILD RATIOS AND GROUP SIZES		Compliance
Services & Care of Children		
8.16.2.24 A GUIDANCE		Compliance
8.16.2.24 B NAPS OR REST PERIOD		Compliance
8.16.2.24 C ADDITIONAL REQUIREMENTS FOR INFANTS AND TODDLERS		Compliance
8.16.2.24 D DIAPERING AND TOILETING		Compliance
8.16.2.24 E ADDITIONAL REQUIREMENTS FOR CHILDREN WITH SPECIAL NEEDS		Compliance
8.16.2.24 F ADDITIONAL REQUIREMENTS FOR NIGHT CARE		N/A
8.16.2.24 G PHYSICAL ENVIRONMENT		Compliance
8.16.2.24 H SOCIAL-EMOTIONAL RESPONSIVE ENVIRONMENT		Compliance
8.16.2.24 I EQUIPMENT AND PROGRAM		Compliance
8.16.2.24 J OUTDOOR PLAY AREAS Deficiencies The weekly playground equipment inspections are not documented correctly. Not accessible at time of visit. Regulation: 8.16.2.24J(4) Corrective Action Plan The facility will document their weekly playground inspections. Date to be Completed: 06/30/2017		Non-compliance
8.16.2.24 K SWIMMING, WADING AND WATER		Not Inspected
8.16.2.24 L FIELD TRIPS		Not Inspected
Food Service		
8.16.2.25 B MEALS AND SNACKS		Compliance
8.16.2.25 C MENUS		N/A
8.16.2.25 D KITCHENS		Compliance

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Food Service		
<p><u>Deficiencies</u> The refrigerator; freezer in the kitchendoes not have a working internal thermometer. Regulation: 8.16.2.25D(6)</p> <p><u>Corrective Action Plan</u> The center will obtain and place a working thermometer in refrigerator; freezer. Date to be Completed: 06/30/2017</p>		
8.16.2.25 E MEAL TIMES	Compliance	
Health & Safety Requirements		
8.16.2.26 A HYGIENE	Compliance	
<p>8.16.2.26 B FIRST AID REQUIREMENTS</p> <p><u>Deficiencies</u> The center's first aid kit does not contain Gauze pads; Adhesive tape. Regulation: 8.16.2.26B(2)</p> <p><u>Corrective Action Plan</u> Missing items will be added to the first-aid kit; staff will be reminded to replace any item used. Date to be Completed: 06/30/2017</p>	Non-compliance	
8.16.2.26 C MEDICATION	Compliance	
8.16.2.27 A-D ILLNESS REQUIREMENTS FOR CENTERS	Compliance	
8.16.2.28 A-H TRANSPORTATION REQUIREMENTS FOR CENTERS	N/A	
Buildings, Grounds & Safety		
<p>8.16.2.29 A HOUSEKEEPING</p> <p><u>Deficiencies</u> The premises in the tarp and garden hose are not safe in that they cause a tripping hazard on the playground. Regulation: 8.16.2.29A(1)</p> <p><u>Corrective Action Plan</u> The safety violation will be corrected and a system for routine safety inspection developed. Corrected on site. Date to be Completed: 06/30/2017</p> <p><u>Deficiencies</u> The Equipment are not in good repair as evidenced by the tire swing is detached. Regulation: 8.16.2.29A(1)</p> <p><u>Corrective Action Plan</u> Repairs will be completed and a system for routine inspection of the center and premises will be established. Corrected on site. Date to be Completed: 06/30/2017</p>	Non-compliance	

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Buildings, Grounds & Safety		
<p><u>Deficiencies</u> The Fixtures are not in good repair as evidenced by the faucet to the sink is loose. Regulation: 8.16.2.29A(1)</p> <p><u>Corrective Action Plan</u> Repairs will be completed and a system for routine inspection of the center and premises will be established. Date to be Completed: 06/30/2017</p>		
8.16.2.29 B PEST CONTROL		Compliance
8.16.2.29 C MECHANICAL SYSTEMS		Compliance
8.16.2.29 D WATER AND WASTE		Compliance
8.16.2.29 E LIGHTING, LIGHTING FIXTURES AND ELECTRICAL		Compliance
8.16.2.29 F EXITS AND WINDOWS		Compliance
8.16.2.29 G TOILET AND BATHING FACILITIES		Compliance
<p>8.16.2.29 H SAFETY COMPLIANCE</p> <p><u>Deficiencies</u> The center's fire extinguishers is not inspected yearly . Firee extinguisher in the kitchen is dated 2003. Regulation: 8.16.2.29H(3)(k)</p> <p><u>Corrective Action Plan</u> Equipment will be maintained and inspected yearly. corrected on site. Date to be Completed: 06/30/2017</p> <p><u>Deficiencies</u> The center failed to conduct a fire drill for the month(s) of January; February; March; April; December. Fire drill logs not accessible Regulation: 8.16.2.29H(2)</p> <p><u>Corrective Action Plan</u> A monthly fire drill will be held and recorded. Date to be Completed: 06/30/2017</p>		Non-compliance
8.16.2.29 I SMOKING, FIREARMS, ALCOHOLIC BEVERAGES, ILLEGAL DRUGS AND CONTROLLED SUBSTANCES		Compliance
8.16.2.29 J PETS		Compliance

Please note: Per CYFD regulation NMAC 8.16.2, failure to comply with the corrective action plans as noted above, may result in further action taken against the licensee.

DM 2:30 pm

05/30/2017

Mischelle B. Blum

05/30/2017

Surveyor: Darlene Montoya

Date

Facility Rep: Susan Florsheim

Date